## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028079

Entity Name: RODRIGUEZ MEDICAL CORP

FILED Apr 13, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3070 WEST 12 AVE 755 EAST 8 AVENUE HIALEAH, FL 33012 HIALEAH, FL 33010

**Current Mailing Address: New Mailing Address:** 

755 EAST 8 AVENUE 3070 WEST 12 AVE HIALEAH, FL 33012 HIALEAH, FL 33010

FEI Number: 14-1953633 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VENTURA, ORLANDO J MD VENTURA, ORLANDO J MD 3070 WEST 12 AVE 755 EAST 8 AVENUE HIALEAH, FL 33012 US HIALEAH, FL 33010 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ORLANDO VENTURA MD 04/13/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete Title: PRFS (X) Change ( ) Addition VENTURA, ORLANDO VENTURA, ORLANDO Name: Name: 3070 WEST 12 AVE Address: Address:

755 EAST 8 AVENUE HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 33010

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORLANDO VENTURA MD **PRES** 04/13/2009